

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					
IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.	2								
TOTAL DEP.	11								
TOTAL CLAIMS	13								